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Governor



Douglas Sale  
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Stephanie Clendenin  
Acting Director

**CALIFORNIA WORKFORCE INVESTMENT BOARD  
HEALTH WORKFORCE DEVELOPMENT COUNCIL**

**September 22, 2011  
10:00 a.m. – 3:00 p.m.**

**Radisson Hotel  
500 Leisure Lane  
Sacramento, CA**

**MEETING SUMMARY**

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**I. Introduction and Opening Remarks**

Vice Chair Chad Silva, opened the meeting and welcomed everybody. Mr. Silva asked that the Health Workforce Development Council (Council) members introduce themselves. Council members/designees who were in attendance are listed below:

Andrea Baker	Cathy Martin
Steve Barrow	Ann McMonigle
Cindy Beck	Jeff Oxendine
Teri Boughton	David Quackenbush
John Blossom	Bob Redlo
Saba Brelvi	Chad Silva
Dena Bullard	Abby Snay
Diane Factor	Kathleen Velasquez
Katherine Flores	Linda Zorn
Gary Gugelchuk	

**II. Chair/Director/Agency Updates**

Mr. Silva explained that the Council, with the help of facilitators from Unleashing Leaders, will be discussing and prioritizing the numerous recommendations received throughout the planning grant process.

Mr. Silva introduced Peter Barth, Assistant Secretary for Program and Fiscal Affairs California Health and Human Services Agency (CHHS). Mr. Barth explained that he had been a part of the Council's work during the previous administration and was excited to

continue to show support for the Council on behalf CHHS Secretary Diana Dooley. He discussed the importance of not only looking at the workforce need under Health Care Reform (HCR) but at our current workforce capacity and the need to improve, change and train the current workforce now with an eye to 2014.

He said that as the State moves forward with the implementing the Health Insurance Exchange and the federal government moves forward with implementing various parts of HCR, they look to California as the lead in access to primary care. He stated that it is important in looking at today's agenda the council look at those recommendations that can realistically be done, in partnership with foundations, institutions of higher education, through the K-12 system, and through the Health and Human Services and Labor and Workforce Development agencies. He encouraged council members to look at the recommendations that had been collected over the last year with an eye to creating important and lasting impact.

The staff of the State Board and OSHPD will continue to update both Secretary Dooley and Secretary Morgenstern from the Labor and Workforce Development Agency on the activities of the Council and the Secretaries look forward to the recommendations coming from the Council. He thanked the Council for all of their hard work and looking forward to working with them in the future.

Doug Sale, Acting Executive Director, California Workforce Investment Board (State Board) gave a brief update on the reduction of federal Workforce Investment Act (WIA) discretionary funding from 15% to 5% in the continuing resolution legislation House Joint Resolution 79. He explained that the reduction to only 5% WIA discretionary would only cover the costs of administering the program by multiple agencies. This would mean the State and Governor would not have any funds for any discretionary projects.

Mr. Sale said that Secretary Morgenstern has been briefed on the work of the Council and he is very supportive and pleased with the progress of the Council to date.

Stephanie Clendenin, Acting Director, Office of Statewide Health Planning and Development (OSHPD) gave an update on OSHPD's Fiscal Year 2011/2012 budget:

The budget includes augmentations to some of their programs to implement legislation, pursue technology projects supporting their health workforce development programs, and expand their efforts in health workforce development as it relates to HCR.

Specifically in the area of Health Workforce Development and HCR, OSHPD received funding for one position to continue their efforts with the Council, three positions to increase resources in our shortage area designation unit, so that they can proactively seek shortage area designations for areas of California that have not yet been designated as Health Professions Shortage Areas (HPSAs).

Ms. Clendenin explained that according to data gathered in 2010 for the current reactive process for designating Primary Care HPSAs, there are approximately 4.9M Californians living in designated Primary Care HPSAs. The 2010 analysis also revealed that there are

potentially over 12.1 million Californians who live in medical service study areas that qualify for Primary Care HPSAs designation. Increasing California's shortage area designations will allow California to leverage additional federal funding to increase the health workforce in these communities.

OSHPD also received approval for the third year of funding for the development of the Health Care Workforce Clearinghouse that is scheduled to go live in June 2012. The Clearinghouse will serve as the single repository of health workforce, education, and labor market information.

The Health Professions Education Foundation (Foundation) received two limited-term positions to support the development and implementation of CalREACH, a web-based application system that will provide for electronic submission of scholarship and loan applications via the web, and allow the staff to electronically process and monitor applications. This was a partnership between the Foundation and OSHPD's Health Workforce Development Division (HWDD) because the CalREACH application will also be used for the Song-Brown Program, State Loan Repayment Program and the HWDD Mini-Grant program.

Ms. Clenendin cited another success of the HWDD/Foundation partnership. The partnership worked closely to award approximately \$2.2 million in federal funds to primary care physician applicants of the National Health Service Corps/State Loan Repayment Program (NHSC/SLRP) and the Steven M. Thompson Physician Corps Loan Repayment Program. The partnership helped the State overcome a barrier that health facilities face with securing matching funds for the NHSC/SLRP. In short, the health facilities were not required to match the SLRP award because the Thompson funds were used for the match and over 60 physicians are able to receive loan repayment in exchange for their service in a health professional shortage area.

Steve Barrow asked if there had been any major conversations with foundations about the health workforce shortages because it also impacts the California Health Care Exchange and telehealth.

Mr. Sale responded that neither he nor the State Board have heard about any conversations with foundations that are happening at the Administration level. Mr. Barth said there are a number of conversations happening with non-profit and for-profit foundations who are very interested in the same policy issues and outcomes that are being discussed by the Council. Foundations are interested in what the Council believes to be the best "next steps". He reiterated that the Council need be realistic about their recommendations.

### **III. Action Item: Approval of June 30, 2011, Meeting Minutes**

The June 30<sup>th</sup> meeting minutes were approved.

### **IV. Role of the Council**

Mr. Sale acknowledged that Council members in their professional roles have conversations with foundations, the Administration and legislators. In those conversations, he cautioned members not to inadvertently act on behalf of the Council or ask for funding on behalf of the Council. Because the Council is a State body, it is the role of the Administration to make requests regarding funding.

Ms. Clenendin reminded that the Council is advisory to the Administration and that the Council is at a critical juncture in terms of the significant work it has completed and the upcoming work on prioritizing recommendations. Those recommendations will then need to be vetted through the Administration before they become a formal body of work from the Council and can be presented and discussed.

## **V. Discussion: Overview of Recommendations Organized Under the Coordinated Health Workforce Pathway Model Elements**

The Council Chair handed the meeting over to Unleashing Leaders (UL) Inc. Keirsten Quest introduced the Unleashing Leaders team and followed with an outline of what the Council will be doing over the next three meetings. She then reviewed the Council's primary goals to set the focus of the day. The primary goals were posted as a constant reminder of - the Council's objective throughout the day. Ms. Quest then reviewed the Council's journey to date: five Council meetings, eleven Regional Focus Group meetings, four Career Pathway Sub-Committee meetings, four Planning Ad Hoc Committee meetings, and literature review.

Ms. Quest outlined the next steps of the journey: there will be three prioritization meetings to go over the 125 recommendations. She noted that this meeting is the rough grain cut. It will highlight some of the themes of the recommendations and give the Council a hard look at what were high priority recommendations and those that didn't have as great of an impact. The next meeting will be to talk about divergent themes and refine the cut. The Council members will also have an opportunity to further discuss the rough cut obtained from the first meeting and further settle on themes and recommendations that will receive an action plan. The third and final meeting will be a fine grain look at the prioritizations of the recommendations and talk about next steps that can be done, creating an action plan.

Ms. Quest reminded the Council that the focus is not about how, process, methods, tactics or strategies to implement the recommendations; but is just about prioritization process. This is an evolutionary process and the Council will be able to provide more in depth thoughts later.

An overview was given of the work to be done. Council members will break out into small groups that have been pre-assigned and individually Council members will work on prioritizing the recommendations based on the criteria. At the end of the day a representative from each team will report out to the larger group about the agreements, divergent views, top priorities and bottom priorities the small groups discussed.

Ms. Quest reviewed ground rules to assist the Council in group work of prioritizing the recommendations. She stated that the day's objective was to have a rough cut prioritization of the 125 recommendations. Unleashing Leaders acknowledged that this is not easy work, and at times will be very frustrating, but asked the council to trust the process and a rough cut will be accomplished today.

There was some discussion to clarify some of the recommendations (e.g., career pipeline is different for different careers). The Council was reminded that their recommendations are high level and individually they may have multiple layers, but at this time we are ranking them as general recommendations. At a later date, an action plan or strategy for that recommendation may be developed and will delve into the finer points.

There was a discussion on the slide of the Council's primary goal. Comments included, the goal is too vague and needed to address the Affordable Care Act policies and timeline. Unleashing Leaders created a parking lot for some of these questions and comments so they could be covered at an appropriate time.

A Council member commented on the need to focus on these priorities and to consider what we can actually do in this State considering the economy. The Council needs to consider what's really doable based on where the State currently is.

Another Council member commented that it sounds like the strategy portion of our goal is missing. A reminder was given that the Council will be working on this during the next 3 meetings and a strategy will not happen today. The Council needs to think globally at a statewide level not just what is best for a department or organization. Strategies need to be based on the priority recommendations, but the plan can't be developed until the prioritization is done.

Ms. Quest stated that Unleashing Leaders recognizes the Council's desire to move forward and act not just talking talk about the recommendations. She reminded the Council that they are going to work on these recommendations during the next three meetings to get to the strategy stage. She asked the Council members to take note of the questions that arise during the discussions and they will have the opportunity to talk about these issues at a later time. She asked the Council to trust the process and do the work knowing that they will be able to discuss their opinions and thoughts at a later date. The Administration will continue to work towards these recommendations and action plans, they intend to reconvene this group to touch bases and provide input on the status of the recommendations moving forward.

Council members convened in their assigned groups. Members of the public were invited to listen to the group discussions. Directions were provided to council members on completing the individual forms using the recommendations, criteria and the scoring criteria. The Council was given about 30 minutes to complete their individual reflections. At each table, Council members received only those recommendations for specific themes.

Posters with the recommendations were taped to the walls and groups were directed to write their total scores into each box for the recommendations. The scores were totaled to create a rough cut of the highest priority recommendations for the groups to discuss. After writing in their scores, the Council was dismissed for lunch.

## **VI. Discussion: Categorization of Health Workforce Development Recommendations**

Shawn Murphy gave instructions to the Council members to guide their group discussions. The groups discussed the highest and lowest ranked recommendations and noted any divergent themes that arose during their discussions.

After an hour's discussion the group representative debriefed their discussions for the larger group. Graphs were presented to the Council to visually represent the high and low priorities obtained from the day's work. After the debrief, Unleashing Leaders acknowledged that this was a general cut and adjustments will need to be made to the priorities and recommendations.

The breakout session was concluded by a plus/delta exercise on the facilitation techniques so Unleashing Leaders can improve and be more effective for the next Council meeting.

## **VII. Public Comment**

Elizabeth Toups, Executive Director, SEIU UHW-West & Joint Employer Education Fund (Education Fund) explained that her organization is a labor/management fund that represents 70,000 health care workers statewide. They are a labor/management trust fund that provides financial support for their health care workers to get training to be as relevant as needed in their careers as possible. The Education Fund is part of a larger national effort that supports over a million health care workers. The Education Fund has shown great success with their career pathway programs through their support and has seen students advance in their organizations.

Ms. Toups said that the key component to the success of their programs has been the wrap around services – the one-on-one relationships with people when they are in school. She also said that the labor/management programs represent the diversity of the health workforce that is critical to providing culturally competent care.

Ms. Toups noted that much of the conversation in the breakout session was geared to primary care physicians and advanced practice nurses and while they are a critical need, she reminded the Council that the needs in the area of allied health professionals are significant and should be considered.

Mr. Barrow asked about the wrap around services that were provided and which services were the most important to the success of the student.

Ms. Toups highlighted three services: (1) one-on-one relationship with either a counselor or coach to work on the issues around balancing work life and school; (2) financial support in

the form of wages for reduced work hours; and (3) working closely with educational providers to provide tutoring classes in such areas as math, English and computer skills to ensure students are as prepared as possible.

Bob Redlo mentioned the excellent working relationship Kaiser Permanente had with the Education Fund. He assured Ms. Toups that there was significant conversation about importance of allied health as well as primary care and it will be a high priority for the Council. He thanked Ms. Toups for coming and discussing the program.

Mr. Barth commented that it was important to consider, not only what can be done on a policy or regulatory level, but what can be done to replicate successful programs across the state. Success stories show how we can encourage partners to do the best they can with limited resources.

Perfecto Munoz, School of Public Health, University of California Berkeley discussed that in looking at pathways, the Council had opportunity move forward the training and development of Community Health Workers. Extensive research has been done on the importance of Community Health Workers as a medical home team. He mentioned there is model for Community Health Workers and they can address many of the issues around prevention and wellness including chronic diseases in different ethnic communities.

He discussed the chronic health issues around the aging Latino population and the ability of the Community Health Workers to work with these issues in different service delivery models.

## **VIII. Council Member Updates**

Andrea Baker, California Workforce Association (CWA) announced that she was retiring and CWA's Executive Director Barbara Halsey would be seeking her replacement of the Council.

Kathleen Velasquez, California Department of Public Health (CDPH) said that the CDPH was continuing to realign their priorities and focusing leadership development and workforce development and competency. Shifted their priorities to students and have developed stronger relationship with Schools of Public Health to increase students who are interested in careers in public health especially undergraduate students.

Jeff Oxendine, California Health Workforce Alliance (CHWA) reported that CHWA was undertaking a number of activities including work in support of the Council and developing strategies for implementing the recommendations from the Primary Care Initiative. Mr. Oxendine mentioned the California Health Professions Consortium's upcoming conference for pipeline programs scheduled for October 13<sup>th</sup> and 14<sup>th</sup> at the University of California Davis Medical School in Sacramento.

Katherine Flores, California Health Professions Consortium announced that she had received an email stating that the Senate had eliminated funding for Health Careers

Opportunity Program (HCOP) grants. She stated that the grants supported a number of workforce development programs throughout the state. She suggested members may wish to send emails to members of Congress in support of the program.

John Blossom, Area Health Education Centers (AHECs) explained that the HCOPs are part of Title 7 as well as the AHECs and that the AHECs were fortunate to receive a one year grant extension for their programs. There are fourteen AHECs statewide supporting health workforce development. They will be applying for five year support in the upcoming months.

He said how impressed he was with the Council's ability to talk with one another across institutional and agency barriers and how that Council could continue the types of conversations at regional level

Chad Silva, Latino Coalition for a Healthy California (LCHC) is working on workforce and primary community-based care and addressing the determinants of health. Regarding workforce, LCHC will be focusing on patient centered medical home delivery system models because it coalesces many of the issues around primary care, community-based care and determinants of health, culturally competency and access. As the LCHC moves in this direction and it will be looking at how this complements the work of the Council.

Steve Barrow, California State Rural Health Association (CSHRA) announced CSHRA's annual conference in Sacramento on November 15<sup>th</sup> and 16<sup>th</sup>. He said they were waiting to see if the Governor would be signing AB 415, Telehealth Advancement Act. He announced the addition of Al Hernandez- Santana as the new Policy Director for CSHRA.

Abby Snay, Jewish Vocational Services (JVS), discussed JVS's new program. There are 27 disadvantaged youth, 18-24 years old who are participating in the third cycle of the bridge program being done in partnership with San Francisco City College. It's a one semester program, 30 hours per week including classes at City College two days a week where they are getting exposure to health careers, basic skills training and medical terminology. At JVS, the students work on their computer skills, receive basic skills tutoring and will have internships at various health care settings. Ms. Snay talked about one of the success stories from the program.

Diane Factor, Los Angeles Health Care Workforce Development Program (Workforce Development Program) said that California received a 1115 Medicaid Waiver, which works with county departments of health. As a result the Los Angeles County Department of Health Services was in the process of transforming to a patient-centered medical home model and they are piloting five county patient-centered medical homes and looking to roll an additional 100 more. They are also working with private clinic partners, many of which are Federally Qualified Health Centers and their number one workforce issue was the need for a Medical Assistant (MA) program and so the Workforce Development Program is starting 70 people at two community colleges (Pasadena and West Los Angeles) in a medical assistant program. Ms. Factor said that employers have expressed the need for hundreds of MAs and they are hoping to get them registered with the U.S. Department of



Labor as an apprenticeship program. Workforce Development Program is also working on a Community Health Worker program for the community mental health clinics. In addition, employers are interested in transforming floor nurses to care managers so they are trying to refocus the clinical practice model and developing an advanced nursing program focusing on the sub-specialties.

Linda Zorn, California Community Colleges Chancellor's Office (CCCCO) announced that Von Tan-Quinlivan was the new Vice-Chancellor for Workforce and Economic Development replacing Jose Millan.

Ms. Zorn mentioned that CCCCCO was working with the Lieutenant Governor's Office on some pilot projects and will update the Council at a later date.

Cindy Beck, California Department of Education stated that Superintendent Tom Torlakson had released his "Blueprint for Greater Schools" and it is his vision for K-12 education. It's a visionary document that includes partnership with industry and looks at how students can be more successful and how to involve parents and the community in that process.

In October, the Superintendent will releasing "Healthy Kids, Healthy California" and it is CDE's effort to try and help the obesity and diabetes problems by helping kids make healthy choices and motivating kids so they will bring it back to the community. The Health Occupations Students of America have been asked to help implement throughout the state.

Cathy Martin, California Hospital Association (CHA) said that a sub-committee of CHA's Workforce Committee will be working on creating stronger relationships with Workforce Investment Boards (WIBs) during the next year. She mentioned that many of their hospitals had great working relationship with WIBs but many of those programs had not been replicated and do not have the best working relationships with WIBs in certain regions. CHA gave a presentation at the California Workforce Association's "Meeting of the Minds" conference in early September that was very well received.

CHA is also partnering with HOSA to show hospitals the different ways they can work with HOSA.

Bob Redlo, Kaiser Permanente discussed that latest data on the number of people in California that will have health insurance as a result of health care reform implementation with the largest increase in Southern California. This will impact how they look at workforce planning. National Workforce at Kaiser has just completed, what will be an annual report on the hardest positions to fill, list of top ten barriers and recommendations. The report should be available for general distribution in October 2011. Over the next year, Kaiser will be focusing on specialty nursing, Clinical Lab Scientists, imaging and nurse manager and assistant managers.

He announced that Kaiser has an annual diversity conference on October 25<sup>th</sup> and 1,000 workers from throughout the nation will be talking about diversity.

Teri Boughton. Assemblymember Monning, Assembly Health Committee said they are working on their legislative package and listened to all of the conversations at the Council meeting and was hopeful that Council members would open to her reaching out to them to develop ideas for the 2012 package. She encouraged members to reach out to her with any ideas.

## **IX. Next Steps**

Mr. Silva said the next steps include the continuation of the prioritization process at an October meeting.

The meeting was adjourned at approximately 3:00 pm.